

05-14-01

PTO/SB05 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

Please type a plus sign (+) inside this box []

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Project of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	1960-00100
First Inventor	CATHERINE SHOEMAKER
Title	METHOD AND APPARATUS FOR MARKING MEDICINE CONTAINER
Express Mail Label No.	EL 776175195 US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO: Commissioner for Patents
Box Patent Application
Washington, D.C. 20231

- | | |
|--|--|
| <p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)</p> <p>2. <input checked="" type="checkbox"/> Applicant claims small entity status.
See 37 CFR 1.27.</p> <p>3. <input checked="" type="checkbox"/> Specification [Total Page 10]
(preferred arrangement set forth below)
- Descriptive title of the invention
- Cross Reference to Related Applications
- Statement Regarding Fed sponsored R & D
- Reference to sequence listing, a table, or a computer program listing appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure</p> <p>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 2]</p> <p>5. Oath and Declaration
a. <input checked="" type="checkbox"/> Newly executed (original or copy)
b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d))
(for continuation/divisional with Box 17 completed)
i. <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u>
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p> | <p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
a. <input type="checkbox"/> Computer Readable Form (CRF)
b. Specification Sequence Listing on:
i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or
ii. <input type="checkbox"/> paper
c. <input type="checkbox"/> Statements verifying identity of above copies</p> |
|--|--|

ACCOMPANYING APPLICATION PARTS

9. ☐ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement ☒ Power of Attorney
(when there is an assignee)
11. ☐ English Translation Document (if applicable)
12. ☒ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s)
(if foreign priority is claimed)
16. ☐ Other:

17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-Part (CIP)

Prior application information:

Examiner

of prior application No.:

Group/Art Unit:

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18. CORRESPONDENCE ADDRESS☒ Customer Number of Bar Code Label 23505 or ☐ Correspondence address below

Name

Address

City

State

Zip Code

Country

Telephone

Fax

Name (Print/Type)

JONATHAN PIERCE

Registration No. (Attorney/Agent)

42,073

Signature

Date May 11, 2001

Burden Hour Statement: This form is estimated to take 0.2 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, D.C. 20231. DO NOT SENT FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, D.C. 20231.

FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

Complete if Known

FEE TRANSMITTAL for FY 2001 <i>Patent fees are subject to annual revision.</i>		Application Number	NOT YET ASSIGNED
		Filing Date	CONCURRENTLY HEREWITH
		First Named Inventor	CATHERINE SHOEMAKER
		Examiner Name	*
		Group Art Unit	*
		Attorney Docket No.	1960-00100
TOTAL AMOUNT OF PAYMENT		\$ 355.00	

METHOD OF PAYMENT

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayment to:
- Deposit Account Number: 03-2769
 Deposit Account Name: Conley, Rose & Tayon, P.C.
- ☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17
- ☒ Applicant claims small entity status. See 37 CFR 1.27

2. ☐ Payment Enclosed:
- ☐ Check ☐ Credit Card ☐ Money Order ☒ Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee	Fee	Fee Description	Fee Paid
Code (\$)	Code (\$)				
101	710	201	355	Utility filing fee	\$355
106	320	206	160	Design filing fee	\$
107	490	207	245	Plant filing fee	\$
108	710	208	355	Reissue filing fee	\$
114	150	214	75	Provisional filing fee	\$

SUBTOTAL (1) \$ 355.

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
12	- 20** = 0 x	18.00	= \$00.00
Independent Claims	3 3** = 0 x	80.00	= \$00.00
Multiple Dependent		270.00	= \$ 00.00

Large Entity	Small Entity	Fee	Fee	Fee Description
Code (\$)	Code (\$)			
103	18	203	9	Claims in excess of 20
102	80	202	40	Independent Claims in excess of 3
104	270	204	135	Multiple dependent claim, if not paid
109	80	209	40	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) \$ 0.00

** or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

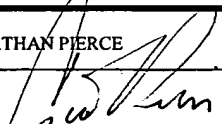
Large Entity	Small Entity	Fee	Fee	Fee Description	Fee Paid
Code (\$)	Code (\$)				
105	130	205	65	Surcharge - late filing fee or oath	\$
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	\$
139	130	139	130	Non-English specification	\$
147	2,520	147	2,520	For filing a request for <i>ex parte</i> reexamination	\$
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	\$
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	\$
115	110	215	55	Extension for reply within first month	\$
116	390	216	195	Extension for reply within second month	\$
117	890	217	445	Extension for reply within third month	\$
118	1,390	218	695	Extension for reply within fourth month	\$
128	1,890	228	945	Extension for reply within fifth month	\$
119	310	219	155	Notice of Appeal	\$
120	310	220	155	Filing a brief in support of an appeal	\$
121	270	221	135	Request for oral hearing	\$
138	1,510	138	1,510	Petition to institute a public use proceeding	\$
140	110	240	55	Petition to revive - unavoidable	\$
141	1,240	241	620	Petition to revive - unintentional	\$
142	1,240	242	620	Utility issue fee (or reissue)	\$
143	440	243	220	Design issue fee	\$
144	600	244	300	Plant issue fee	\$
122	130	122	130	Petitions to the Commissioner	\$
123	50	123	50	Petitions related to provisional applications	\$
126	180	126	180	Submission of Information Disclosure Stmt	\$
581	40	581	40	Recording each patent assignment per property (times number of properties)	\$
146	710	246	355	Filing a submission after final rejection (37 CFR § 1.129(a))	\$
149	710	249	355	For each additional invention to be examined (37 CFR § 1.129(b))	\$
179	710	279	355	Request for Continued Examination (RCE)	\$
169	900	169	900	Request for expedited examination of a design application	\$
Other fee (specify)					\$

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) \$

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	JONATHAN PIERCE	Registration No. (Attorney/Agent)	42,073	Telephone	(713) 238-8000
Signature		Date	May 11, 2001		

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, D.C. 20231. DO NOT SENT FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, D.C. 20231.